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7590 09/21/2007

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10/22/2007 FMEKE12 0000003 10673116

01 FC:1504 300.00 OP  
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<i>MARTIN FAIER</i>	(Depositor's name)
<i>Martin Faier</i>	(Signature)
<i>OCT. 16, 2007</i>	(Date)

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
10/673,116	09/29/2003	Darren James Zellak	RI92403	9839

TITLE OF INVENTION: CONNECTOR COUPLING/DECOUPLING TOOL

Adjustment date: 10/23/2007 FMEKE12  
10/22/2007 FMEKE12 0000003 10673116  
02 FC:1505  
-700.00 OP

APPLN. TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE DUE	PREV. PAID ISSUE FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	YES	\$700	\$300	\$0	\$1000	12/21/2007

EXAMINER	ART UNIT	CLASS-SUBCLASS
CHIN, PAUL T	3652	294-100000
1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).	2. For printing on the patent front page, list <input type="checkbox"/> (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, <input type="checkbox"/> (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.	10/22/2007 FMEKE12 0000003 060040 10673116 01 FC:1501 20.00 OP 700.00 OP
<input type="checkbox"/> Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.	<input type="checkbox"/> "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev. 03-02 or more recent) attached. Use of a Customer Number is required.	1. <i>FAIER &amp; FAIER, PC</i> 2. <i>MARTIN FAIER</i> 3. <i>JAMES M. FAIER</i>

3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

*RICHCO INC.*

(B) RESIDENCE: (CITY and STATE OR COUNTRY)

*MORTON GROVE, IL*

Please check the appropriate assignee category or categories (will not be printed on the patent):  Individual  Corporation or other private group entity  Government

4a. The following fee(s) are submitted:

- Issue Fee
- Publication Fee (No small entity discount permitted)
- Advance Order - # of Copies \_\_\_\_\_

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- A check is enclosed.
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- The Director is hereby authorized to charge the required fee(s), any deficiency, or credit any overpayment, to Deposit Account Number 060040 (enclose an extra copy of this form).

5. Change in Entity Status (from status indicated above)

- a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27.
- b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).

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Authorized Signature

*Martin Faier*

Date OCT. 16, 2007

Typed or printed name

*MARTIN FAIER*

Registration No. 20 294

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